




PATENT NUMBER.

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| O.I.P.E. <br>SCANNED  Q.A.  | PATENT DATE |
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**O.J.P.E.**

PATENT DATE

SCANNED

**Q.**

## APPLICANTS

Lixin Xue  
Kent Koller  
John Paine

### III

Cigarette filters of shaped micro cavity fibers impregnated with  
flavorant materials

| <b>ISSUING CLASSIFICATION</b>       |                 |                           |  |  |  |  |  |
|-------------------------------------|-----------------|---------------------------|--|--|--|--|--|
| <b>ORIGINAL</b>                     |                 | <b>CROSS REFERENCE(S)</b> |  |  |  |  |  |
| <b>CLASS</b>                        | <b>SUBCLASS</b> | <b>CLASS</b>              | <b>SUBCLASS (ONE SUBCLASS PER BLOCK)</b> |  |  |  |  |
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| <b>INTERNATIONAL CLASSIFICATION</b> |                 |                           |  |  |  |  |  |
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| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>  | <b>DRAWINGS</b>                                 |             |            | <b>CLAIMS ALLOWED</b>             |                      |
|  | Sheets Drwg.                                    | Figs. Drwg. | Print Fig. | Total Claims                      | Print Claim for O.G. |
| <input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.                       | _____ (Assistant Examiner) _____ (Date)         |             |            | <b>NOTICE OF ALLOWANCE MAILED</b> |                      |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____ |   |             |            | <b>ISSUE FEE</b>                  |                      |
| _____<br>_____<br>_____  | _____ (Primary Examiner) _____ (Date)           |             |            | Amount Due                        | Date Paid            |
| <input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.                                |   |             |            | <b>ISSUE BATCH NUMBER</b>         |                      |
|  | _____ (Legal Instruments Examiner) _____ (Date) |             |            |                                   |                      |

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